



**State of New Hampshire**  
**Department of Agriculture, Markets & Food**  
**Division of Weights and Measures**  
**ORDER FORM FOR PLACED IN SERVICE /**  
**INSPECTION REPORT FORMS &**  
**CERTIFICATION STAMPS**

New Hampshire  
 Department of Agriculture,  
 Markets & Food

|  |   |
|--|---|
| <p><b>Mail order form to:</b><br/>         Division of Weights and Measures<br/>         P.O. Box 2042<br/>         Concord, NH 03302-2042<br/>         (603) 271-3700<br/>         Fax: (603) 271-1109</p> <p>A check or money order must accompany the order, and be made payable to:<br/> <u>“Treasurer, State of NH”</u></p> | Service Technician Name: _____<br>Service Tech. Signature: _____<br>Service Company: _____<br>Address: _____<br>City: _____<br>State: _____<br>Zip Code: _____<br>Telephone: _____<br>UPS Acct. No.: _____<br>FED EX Acct. No.: _____ |
|--|---|

| PLACED IN SERVICE/INSPECTION REPORT FORMS<br>25 Forms per Pad                               | COST        | QTY | TOTAL |
|---|-------------|-----|-------|
| Retail Motor Fuel Devices<br>(Gas Pumps) (Code: A1)   | \$6.00 ea.  |     |       |
| Vehicle Tank Meters<br>(Not Temperature Corrected) (Code: A2)                               | \$6.00 ea.  |     |       |
| Refined Petroleum Products<br>(Temperature Correction – VTM) (Code: A3)                     | \$6.00 ea.  |     |       |
| Large Volume Petroleum Measuring Devices (Code: A4)   | \$6.00 ea.  |     |       |
| Liquid Petroleum Measuring Devices (Code: A5)   | \$6.00 ea.  |     |       |
| Other Types of Liquid measuring Devices (Code: A6)  | \$6.00 ea.  |     |       |
| Taxi Meters (Code: A7)  | \$6.00 ea.  |     |       |
| Vehicle Scales (Code: B1)   | \$6.00 ea.  |     |       |
| Scales/Linear Measures (Code: B2)   | \$6.00 ea.  |     |       |
| Precision Scales (Code: B3)   | \$6.00 ea.  |     |       |
| <b>CERTIFICATION STAMPS</b><br>Packs of 50  | \$25.00 ea. |     |       |
| <b>ORDER TOTAL:</b><br><i>(Includes Inspection Report Forms &amp; Certification Stamps)</i> |             |     | \$    |

|  |   |
|--|---|
| <b>For Office Use:</b>                         |   |
| Date Received: ___/___/___                     | Date Shipped (If Applicable): ___/___/___ |
| Cash or Check Amount: \$ _____                 | Check/Money Order No.: _____              |
| Certification Stamps Purchased: Start #: _____ | End #: _____                              |